

03-16-05

3611 *etc*



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Mary M. DaRif, et al.

) Examiner: Brian K. Green

)

Attorney Docket No.: 6962

) Group Art Unit: 3611

)

Serial No.: 10/026,041

)

Filing Date: 12/21/2001

)

For: PAINT COLOR CARD  
AND METHODS OF USING  
THE SAME

)

)

)

)

Commissioner for Patents  
P. O. Box 1450  
Alexandria, VA 22313-1450

**RESPONSE TO OFFICE ACTION**

Dear Sir:

This Response to Office Action is filed in response to the Office Action dated November 30, 2004. The three-month shortened statutory period for responding to the Office Action expired on February 28, 2005. As such, Applicant hereby requests a one-month extension of time under 37 C.F.R. 1.136 in which to file this Response. The Commissioner is hereby authorized to charge the one-month extension fee of \$120.00 to Deposit Account No. 19-2025. The Commissioner is also hereby authorized to charge any additional fees, or credit any overpayments, to Deposit Account No. 19-2025.

EV091946520US

**AMENDMENT TRANSMITTAL LETTER (Large Entity)**Applicant(s): **Mary M. DaRif, et al.**

Docket No.

**6962**

Application No.

**10/026,041**

Filing Date

**12/21/2001**

Examiner

**Brian K. Green**

Customer No.

Group Art Unit

**3611**

Confirmation No.

Invention:

**PAINT COLOR CARD AND METHODS OF USING THE SAME****COMMISSIONER FOR PATENTS:**

Transmitted herewith is an amendment in the above-identified application.

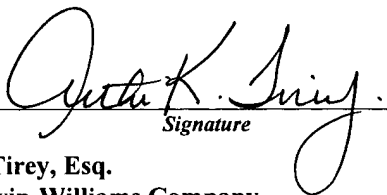
The fee has been calculated and is transmitted as shown below.

**CLAIMS AS AMENDED**

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	17 -	24 =	0	x \$50.00	\$0.00
INDEP. CLAIMS	2 -	3 =	0	x \$200.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00

- ☒ No additional fee is required for amendment.
- ☐ Please charge Deposit Account No. \_\_\_\_\_ in the amount of \_\_\_\_\_
- ☐ A check in the amount of \_\_\_\_\_ to cover the filing fee is enclosed.
- ☒ The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account **19-2025**
- ☒ Any additional filing fees required under 37 C.F.R. 1.16.
- ☐ Any patent application processing fees under 37 CFR 1.17.
- ☐ Payment by credit card. Form PTO-2038.

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

  
Signature

**Arthi K. Tirey, Esq.**  
**The Sherwin-Williams Company**  
**11 Midland Bldg. - Legal Dept.**  
**101 Prospect Avenue, N.W.**  
**Cleveland, Ohio 44115**

**Reg. No. 50,960**  
**Phone: (216) 566-3650**

Dated: **March 15, 2005**

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on

(Date)

Signature of Person Mailing Correspondence

Typed or Printed Name of Person Mailing Correspondence

CC: